Late Contribution Report

Type or print in ink. Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

NAME OF FILER Brian Dahle for Senate 2019			Date of This Filing01/31/2019	Date Stamp	CALIFORNIA 497		
AREA CODE/PHONE NUMBER (209)656-1542	I.D. NUMBER (if applicable) 1415244		Report No		For Official Use Only		
STREET ADDRESS			Amendment to Report No.	Page 1 of 2			
CITY Bieber	STATE CA	ZIP CODE 96009	(explain below) No. of Pages 2				

Late Contribution(s) Received

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
01/31/2019	California Optometric PAC Sacramento, CA 95814	☐ IND ■ COM ☐ OTH ☐ PTY ☐ SCC		\$4,700.00
01/31/2019	Local Societies of the California Optometric Assoc PAC Sacramento, CA 95816 ID# 950393	□ IND ■ COM □ OTH □ PTY □ SCC		\$4,700.00
01/31/2019	Northern California Carpenters Regional Council PAC Oakland, CA 94621-1480 ID# 972104	☐ IND☐ COM☐ OTH☐ PTY☐ SCC		\$9,300.00

*Contributor Codes	
IND - Individual PTY - Political	l Party
COM - Recipient Committee (other than PTY or SCC) SCC - Small COTH - Other	Contributor Committee

Reason for Amendment:

FPPC Form 497(June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

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Late Contr	ibution(s) Made								
DATE MADE		ILING ADDRESS AND ZIP COD			ATE AND OFFICE OR AND JURISDICTION	AN CON	MOUNT OF TRIBUTION	DATE OF ELECTION (IF APPLICABLE)	

Reason for Amendment:

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